

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YBW	7531	
O.I.P.E. CLASSIFIER	YBW	32	1/1/13
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		7/14/35	12/18/10

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

**BEST AVAILABLE COPY**

Claim	Date
Final	
Original	1/2/10
1	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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